CERTIFICATE OF DISCONTINUANCE OF BUSINESS AS PARTNERS

The undersigned do hereby certify that they have conducted or transacted as partners under the name or designated of

under the in the office the filing of discontinu	of the County Clerk, County of	State of that the last amended dex number onger required for the or the co	onditions under which the bus	day of day of er certify that s was siness is
	te full names of all the persons name of filed as persons conducting or trans			eate last
NAME (V	Write "Deceased" after names of tho	se not living.)	RESIDENCE	
()		2		
				_
				_
				_
We the	erefore desire to file this certificate of	discontinuance.		_
	NESS WHEREOF, We have this I this certificate.	day of	, made	
	_			_
				_
				_
				_
	-			_
				_
STATE OF	NEW YORK, ERIE County ss:			
On	before me personally came		rsonally known to me or proved to	
(he)(she)(th	evidence to be the individual(s) whose nan ey) executed the same in (his)(her)(their) c o) or the person on behalf of which the indiv	apacity(ies) and that by (h	nis)(her)(their) signature(s) on the i	-
		NI - D 12	/C :: (D 1	_
		Notary Public	c/Commissioner of Deeds	